

CR2019 0005

ARREST BOOKING SHEET/PART A/PROBABLE CAUSE STATEMENT														
Last Name Packer		First Douglas		Middle	Suffix	Alias, Scars		Marks		Booking Number 287779 19-0042				
Address 501 Earl Dr.		City Sierra Vista		State/Zip AZ 85636		Origin	Sex M	Hgt. 6-01	Wgt. 192	Hair Bro	Eyes Hzi	Complex		
Age 64	Date of Birth 05 /55	Place of Birth	Citizen US	Social Security Number		Employer			Occupation					
Emergency Name and Number and Relationship to Person Wife						Address 501 Earl Dr. Sierra Vista, AZ								
F.B.I. Number			State ID Number			Driver's License No. and State B12744323								
Arresting Agency Cochise County S.O.			Arrest Date 01-05-19		Arrest Time 0140		DR Number 19-00430		Location of Arrest Sierra Vista Detective's Office					
Arresting Officer's Name and Number Det. T. Borquez 0622				Transporting Officer				Location of Occurrence Bisbee Jail						
1. Did defendant attempt to avoid or resist arrest? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2. Was defendant armed at time of offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Was anyone injured or threatened with person injury by defendant during the course of the offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		4. Was defendant armed at time of arrest? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Has defendant admitted involvement in the offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
6. Has defendant made any threats against potential witnesses? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7. Is defendant considered a flight risk? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Was evidence of the offense found in defendant's possession? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		9. Does the State oppose an unsecured release at this time? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		10. Defendant is pursuant to <input checked="" type="checkbox"/> Arrest <input type="checkbox"/> Summons <input type="checkbox"/> Warrant						
11. Was Property Taken or Destroyed? <input type="checkbox"/> Yes <input type="checkbox"/> No Value? _____ Has it been recovered? <input type="checkbox"/> Yes <input type="checkbox"/> No				12. Is there any indication defendant is <input type="checkbox"/> an alcoholic <input type="checkbox"/> an addict <input type="checkbox"/> mentally disturbed				13. List any other charges outstanding against the defendant						
Is this being submitted as a 48-hour complaint? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Explain YES answers to questions 1 - 13 8. blue underwear 9 Because of his position of authority he is a danger to the community										
IF SHOPLIFTING - ITEM TAKEN:														
OFFICER'S STATEMENT OF PROBABLE CAUSE: To: JUDGE Poppe COURT: JP#1 (INCLUDING ALL ELEMENTS OF WHO/WHAT/WHEN/WHERE/HOW)														
See Attached														
Print Officer Name and Badge # Det. T. Borquez 0622						Officer's signature: _____								
JP Court 1	JP Warrant	SC Div	SC Warrant	JP Court 1	JP Warrant	SC Div	SC Warrant	JP Court 1	JP Warrant	SC Div	SC Warrant			
Charge Description Sexual Abuse		Cnts 4	Charge Description Sexual Assault		Cnts 1	Charge Description Unlawful Sexual Conduct		Cnts 1						
Violation of Code/Sec: A.R.S. 13-1404 A		Compl No.	Violation of Code/Sec: A.R.S. 13-1406 A		Compl No.	Violation of Code/Sec: A.R.S. 13-1419 A2		Compl No.						
Why released & Receipt		Released by:		Why released & Receipt		Released by:		Why released & Receipt		Released by:				
Date Released		F <input checked="" type="checkbox"/> M <input type="checkbox"/>	Narc/Drug <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Released		F <input checked="" type="checkbox"/> M <input type="checkbox"/>	Narc/Drug <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Released		F <input checked="" type="checkbox"/> M <input type="checkbox"/>	Narc/Drug <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Booked 1-5-19		Time 0142	Day Sat	Badge # 204	Booking Officer Twins		Hold Victim	Booking Officer Signature <i>[Signature]</i>		DR No: 1743				
DR No: 19-00430				DR No: 19-00430				DR No: 19-00430						
Vehicle Color		Year	Make and Model		License No.		State		Disposition of vehicle:					